

## UNITED STATES CIVIL SERVICE COMMISSION

## BULLETIN

Washington 25, D. C.

August 20, 1962

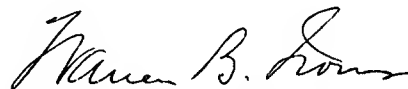
BULLETIN NO. 890-12

SUBJECT: FEDERAL EMPLOYEES HEALTH BENEFITS PROGRAM: LIMITED OPPORTUNITY  
TO CHANGE REGISTRATION

*Heads of Departments and Independent Establishments:*

A proposed amendment to the Health Benefits Regulations will give certain employees eligible to participate in the Federal Employees Health Benefits Program an opportunity to change registrations between October 1 and 15, 1962. The attachment to this Bulletin explains the changes permitted, identifies the plans that will change and the plans that will not change in November 1962, when the new contract year begins, and gives procedural instructions to be followed this fall.

The Commission appreciates the continuing interest in and the generally excellent administration of the Health Benefits Program by agency installations.



Warren B. Irons  
Executive Director

INQUIRIES: Bureau of Retirement and Insurance, DUDley 6-4886  
(Code 129, Extension 4886) - Mr. Brown

CODE: 890- Group Health Insurance

DISTRIBUTION: FPM  
62-63

BULLETIN EXPIRES October 16, 1962

Instructions Governing Limited Opportunity to Change Registration  
(October 1 - 15, 1962)

I. Regulation Change

The limited opportunity to change registrations will be provided by amending the Health Benefits Regulations effective October 1, 1962, as follows:

Section 89.3(e) is amended to read as follows:

(1) Not less often than once every three years, the Commission will by regulation provide every employee an opportunity for enrollment and change of enrollment, on such terms and conditions as it may prescribe.

(2) During the period October 1 to October 15, 1962, any employee who has not been an enrolled employee at any time during the period May 1, 1962 to September 30, 1962, may register to be enrolled. During the period October 1 to October 15, 1962, any employee enrolled for self alone may change his enrollment to self and family in the same plan and option.

(3) During the period October 1 to October 15, 1963, any employee who is not registered to be enrolled may register to be enrolled, and any enrolled employee may change his enrollment from one plan or option to another, or from self alone to self and family, or both.

For information purposes, note that the amendment also provides for an "open season" in 1963. (Additional perfecting amendments to the regulations, to be effective November 1, 1962, will be published before that date in the Federal Register and in an FPM Letter.)

II. Registration Changes Permitted

The changes authorized by paragraph (2) of the proposed amendment are limited to--

1. change from self only to self and family in the same plan and option.
2. change from not enrolled to enrolled in any plan and option available to the employee. This change is permissible for an employee who cancelled his enrollment as well as for an employee who is registered not to enroll, provided he was not enrolled at any time between May 1 and September 30, 1962.

Attachment to Btn. No. 890-12 (2)

No other changes are permitted because of this limited enrollment opportunity. Changes and new enrollments authorized by the present regulations may continue to be made, as usual, between October 1 and 15, 1962.

### III. Changes in Plans

- a. All plans now participating in the program will continue to participate, and no new plans will be added for the next contract year November 1, 1962 - October 31, 1963.
- b. The following plans will make no changes in benefits or in subscription charges for the next contract year:

Service Benefit Plan  
Indemnity Benefit Plan

AFGE Health Benefit Plan  
Motor Vehicle Employees Benefit Plan

Community Health Association, Detroit, Michigan  
Group Health Cooperative of Puget Sound, Seattle, Wash.  
Group Health Insurance, Inc., New York, New York  
Hawaii Medical Service Association, Honolulu, Hawaii  
Health Insurance Plan of Greater New York, New York, N.Y.  
Kaiser Foundation Health Plan Inc., Northern California  
Region, San Francisco, California  
Medical Guild Health Plan, San Francisco, California  
National Hospital Association, Portland, Oregon  
North Idaho District Medical Service Bureau, Inc.,  
Lewiston, Idaho  
Physicians Association of Clackamas County,  
Oregon City, Oregon  
Ross-Loos Medical Group, Los Angeles, California  
Seguros de Servicio de Salud de Puerto Rico, Inc.,  
Santurce, Puerto Rico  
Washington Physicians Service, Seattle, Washington  
Western Clinic, Tacoma, Washington

- c. The following plans will not change benefits but will increase subscription charges for the next contract year:

Bridge Clinic, Seattle, Washington  
Group Health Association, Inc., Washington, D. C.  
Group Health Plan, Inc., St. Paul, Minnesota  
Kaiser Foundation Health Plan, Inc., Southern California  
Region, Los Angeles, California  
Kaiser Foundation Health Plan of Oregon, Portland, Oregon  
San Joaquin Foundation for Medical Care, Stockton, Calif.  
Seattle Letter Carriers Medical Service, Inc.,  
Seattle, Washington

- d. The plans listed below will not change subscription charges but will make some benefit changes for the next contract year. Changes are minor and result in added benefits.

Canal Zone Benefit Plan  
Federal Postal Hospital Association Plan  
Foreign Service Benefit Plan  
Maintenance Employees Benefit Plan  
NALC Health Benefit Plan  
National Postal Union Benefit Plan  
Postmasters Benefit Plan  
Rural Carrier Benefit Plan  
SAMBA Health Benefit Plan  
United Federation Postal Clerks Plan

- e. The following plans will change both benefits and subscription charges for the next contract year:

Kaiser Foundation Health Plan, Inc., Honolulu, Hawaii  
Physicians and Surgeons Association, Los Angeles,  
California

- f. An FPM Letter amending the Schedule of Subscription Charges to reflect the subscription charge increases will be issued before the increases become effective.
- g. An employee may not change plans because of an increase in subscription charge. He may, of course, cancel his enrollment and reenroll during the 1963 "open season," but an employee attempting to cancel should be cautioned that a period of non-enrollment would jeopardize his and his survivors' right to continue enrollment after retirement or death.

#### IV. Brochures

- a. Brochures for the plans which are not making any changes will not be revised and the November 1961 editions should continue to be used during the next contract year.
- b. Brochures are now being revised for the plans which are making changes and will be distributed to agencies as soon as possible. On receipt of the new (1962 edition) brochures, they may be used and the superseded 1961 edition brochures may be destroyed.
- c. Revised brochures should not be issued to employees already enrolled in plans which are changing. The old brochure and BRI 41-117, mentioned in item v, give the employee a complete description of his plan. However, if an enrolled employee asks for a new brochure of his plan, it may be given to him.

Attachment to Btn. No. 890-12 (4)

## V. BRI 41-117

The Commission is revising the booklet BRI 41-117 for the October 1 - 15, 1962 limited opportunity to change registration. The booklet will be distributed as soon as possible and will contain information about the permissible changes in registration. It will also list the plans which are not changing and explain the changes in those which are. Every employee covered by the health benefits law should be given a copy of this booklet.

## VI. Distribution of Brochures and BRI 41-117

- a. New brochures and BRI 41-117 will be shipped to one distribution point in each agency. The agency will be responsible for redistribution to its installations. Information regarding shipping points and quantities has already been requested from the Health Benefits Officer of each agency.
- b. BRI 41-117 may be distributed to all covered employees by an installation as soon as its supply of the booklet is received. Distribution should be completed no later than October 1, 1962. (BRI 41-117 is the only piece of literature which must be generally distributed by installations to all employees covered by the health benefits law, whether they are presently enrolled in a plan or not.)
- c. An unenrolled employee who is interested in enrolling between October 1 and 15, 1962 should, upon request, be given the brochures for all plans available to him as well as SF 2809 and SF 2809A.

## VII. "Limited Opportunity to Change Registration" Procedures

- a. An employing office may accept, but not process, SF 2809's before October 1, 1962. SF 2809's should not be accepted after October 15, 1962, unless the employing office determines that the employee was unable, for cause beyond his control, to timely take advantage of the limited opportunity. Such late registrations may be accepted and processed, with a prospective effective date, as explained on pages 19 and 26, of the Health Benefits Manual\*.
- b. Changes from self only to self and family become effective on the first day of the employee's first pay period which begins after October 31, 1962.

\*Issued as an attachment to FPM Letter 890-4 dated May 15, 1962

- c. New enrollments\*\* become effective on the first day of the employee's first pay period which begins after October 31, 1962, provided the employee is in pay status at any time during the preceding pay period. If the employee is not in pay status during the preceding pay period, his enrollment will become effective on the first day of his first pay period which begins after the day he returns to pay status.
- d. SF 2809's should be processed the same as other new enrollments or changes from self only to self and family, as explained in the Health Benefits Manual. The following comments are offered for further guidance:
  - 1. Be sure the employee is eligible to change his registration. For example, an employee who is not now enrolled but who was enrolled at any time on or after May 1, 1962, may not enroll on the basis of the October 1 - 15 limited opportunity.
  - 2. The number of the event permitting the limited opportunity change, to be shown in Part D of SF 2809, is 1 (one); it is not necessary to show the date of the event.
  - 3. SF 2809's may be sent to carriers with regular transmittals as explained on page 74 of the Health Benefits Manual. SF 2809's should not be accumulated for more than one week, so that SF 2809's received in the employing office on October 15 should be sent to the carriers no later than October 22. Prompt processing of SF 2809's is important in order that employees may receive their identification cards as soon as possible.

\*\* Except for certain substitutes in the Postal Field Service